### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC	
	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	i on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Alaska Air	M M / D D / Y Y Y Y Y
Mailing Address PO Box 68900	10 15 2016 Amount
City State Zip Code	250.00
Seattle WA 98168	Transaction ID : SE.6597  Date of Disbursement or Obligation
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17  Category/ Type  002	10 15 2016
Name of Federal Candidate Support Offic	e Sought: House District:
LEE, MIKE, , ,	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought  Disb. 2016	ursement For: Primary   General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Alaska Air	M = M / D = D / Y = Y = Y
Mailing Address PO Box 68900	10 15 2016
1 0 200 00300	Amount
City State Zip Code	250.00
Seattle WA 98168	Transaction ID : SE.6599  Date of Disbursement or Obligation
Purpose of Expenditure  Category/  Category/  Category/	M M / D D / Y Y Y Y Y
Airfare for canvassing deployment 10/15-10/17  Airfare for canvassing deployment 10/15-10/17  Outcomes 10/15-10/17  Outcomes 10/15-10/17	10 15 2016
Name of Federal Candidate Support Office	e Sought: 🗶 House District: 04
LOVE, MIA, , ,	President Senate State: UT
	ursement For: Primary X General
Per Election for Office Sought 67776.80 2016	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(_,	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Buchanan, Emily, , ,	M / D D / Y Y Y Y
Signature [Electronically Filed] Date	10 17 2016

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report fill	ed on M / D D / Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Delta Airlines	10 15 2016
Mailing Address 1030 Delta Blvd.	Amount
City State Zip Code	1250.00
Atlanta GA 30354	Transaction ID : SE.6602
Purpose of Expenditure  Airford for any position deployment 10/15 10/17  Category/	Date of Disbursement or Obligation
Airfare for canvassing deployment 10/15-10/17  Type  002	10 15 2016
	fice Sought: House District:
LEE, MIKE, , ,	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought  Display 19750.00  Display 19750.00	sbursement For: Primary <b>X</b> General  16 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Delta Airlines	M = M / D = D / Y = Y = Y
Mailing Address 1030 Delta Blvd.	
	Amount
City State Zip Code	1250.00
Atlanta GA 30354	Transaction ID : SE.6627  Date of Disbursement or Obligation
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17  Category/ Time 002	M M / D D / Y Y Y Y
туре	10 15 2016
	fice Sought:   House District: 04
LOVE, MIA, , ,	President Senate State: UT
Calcinati Total To Bato	sbursement For: Primary 🗶 General
Per Election for Office Sought 76026.80	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
· · · · · · · · · · · · · · · · · · ·	7 7 7
(c) TOTAL Independent Expenditures	
	79. 79. 70.
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.	
Buchanan, Emily, , ,  [Electronically Filed] Date	M = M / D = D / Y = Y = Y
Signature [Electronically Filea] Date	10 17 2016

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	include Ly	FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
V	VOMEN SPEAK OUT PAC	C C00530766
Ch	eck if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
	Full Name of Payee	Date of Public Distribution/Dissemination
	Enterprise Rent a Car	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 843 State St	Amount
	City State Zip Code	2000.00
	Salt Lake City UT 84111	Transaction ID : SE.6611 Date of Disbursement or Obligation
	Purpose of Expenditure Rental cars for canvassing deployment 10/15-10/17  Category/ Type  002	10 15 2016
	Name of Federal Candidate Support Office	Sought: House District:
	LEE, MIKE, , ,	President State: UT
	Calendar Year-To-Date Per Election for Office Sought  Disbu 2016	rsement For: Primary General
	Pel Election for Office Sought	Other (specify) >
	Full Name of Payee Enterprise Rent a Car	Date of Public Distribution/Dissemination
	Mailing Address 843 State St	10 15 2016 Amount
	City State Zip Code	2000.00
	·	Transaction ID : SE.6613  Date of Disbursement or Obligation
	Purpose of Expenditure Rental cars for canvassing deployment 10/15-10/17  Category/ Type  002	10 15 2016
	Name of Federal Candidate Support Office	Sought: House District: 04
	LOVE, MIA, , ,	President Senate State: UT
	Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	rsement For:  Primary  General  Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures	4000.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	1 4 1 4 1 6
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	Buchanan, Emily, , ,  [Electronically Filed] Date 10	
	Signature	
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OF

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report fil	ed on M / D D / Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Orbitz	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 500 W. Madison Street	Amount
Suite 1000	
City State Zip Code	1250.00
Chicago IL 60661	Transaction ID : SE.6592  Date of Disbursement or Obligation
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17  Category/ Type  002	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Off	ice Sought: House District:
LEE, MIKE, , ,	President X Senate State: UT
Calendar Year-To-Date Per Election for Office Sought  Dis 20:	sbursement For: Primary   General  Other (specify)    Other (specify)   ✓
Full Name of Payee	Date of Public Distribution/Dissemination
Orbitz	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 500 W. Madison Street	
Suite 1000	Amount
City State Zip Code	1250.00
Chicago IL 60661	Transaction ID : SE.6594  Date of Disbursement or Obligation
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17  Category/ Type  002	10 15 / Y Y Y Y Y Y
Name of Federal Candidate Support Of	fice Sought:   House District: 04
LOVE, MIA, , ,	President Senate State: UT
	sbursement For: Primary General  Other (specify)   Other
(a) SUBTOTAL of Itemized Independent Expenditures	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
	4 4
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.	
Buchanan, Emily, , ,  [Electronically Filed] Date	10 17 2016

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC	
	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	i on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Priceline.com	M M / D D / Y Y Y Y Y
Mailing Address 800 Conneticut Ave	10 15 2016 Amount
City State Zip Code  Norwalk CT 06854	7000.00 Transaction ID : SE.6587
	Date of Disbursement or Obligation
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17  Category/ Type  002	10 15 / 2016
Name of Federal Candidate Support Offic	e Sought: House District:
LEE, MIKE, , ,	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought  Disb	ursement For: Primary   General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Priceline.com	M = M / D = D / Y = Y = Y
Mailing Address 800 Conneticut Ave	10 15 2016
- Coo Connecticut / We	Amount
City State Zip Code	7000.00
Norwalk CT 06854	Transaction ID : SE.6589
Purpose of Expenditure  Category/  Category/  Category/	Date of Disbursement or Obligation
Airfare for canvassing deployment 10/15-10/17  Airfare for canvassing deployment 10/15-10/17  Outgory, Type  002	10 15 2016
Name of Federal Candidate Support Office	e Sought: <b>x</b> House District: <u>04</u>
LOVE, MIA, , ,	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought  Disb 2016	ursement For: Primary
· · · · ·	United (Specify)
(a) SUBTOTAL of Itemized Independent Expenditures	14000.00
(h) CUDTOTAL of United in discount of Emperities	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
	4 4
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Buchanan, Emily, , ,	M / D D / Y Y Y Y Y
[Electronically Filed] Date	10 2016
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC  C C00530766  Check if 24-hour report	- Y - Y - Y
C C00530766	
	YYYY
Full Name of Payee Town Place Suites  Date of Public Distribution/Dis	ssemination
Mailing Address 573 High Market Drive	2016
Amount	
City State Zip Code	5000.00
West Valley City  UT 84120  Transaction ID: SE.6606  Date of Disbursement or Oblights  Description:	gation
Purpose of Expenditure Lodging for canvassing deployment 10/15-10/17  Category/ Type 002	2016
Name of Federal Candidate  X Support Office Sought: House Dis	strict:
LEE, MIKE, , , Oppose President Senate S	State: UT
Calendar Year-To-Date Per Election for Office Sought  Disbursement For: □ Primary 2016 □ Other (specify) ▶	<b>✗</b> General
Full Name of Payee Date of Public Distribution/Dis	ssemination
Town Place Suites	2016
Mailing Address 573 High Market Drive  Amount	
City State Zip Code	5000.00
West Valley City  UT 84120  Transaction ID: SE.6608  Date of Disbursement or Obli	igation
Purpose of Expenditure Lodging for canvassing deployment 10/15-10/17  Category/ Type  002  M10  15	2016
Name of Federal Candidate	strict: 04
LOVE MIA	State: UT
Calendar Year-To-Date Per Election for Office Sought  72776.80  Disbursement For: Primary 2016  Other (specify) ▶	<b>✗</b> General
(a) SUBTOTAL of Itemized Independent Expenditures	10000.00
(a) COSTOTAL OF ROMANDO MARKET LAPORIGINAL EXPONENTIAL CONTRACTOR OF THE CONTRACTOR	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	-
(c) TOTAL Independent Expenditures	33500.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is nearly committee) any political party committee or its agent.	
Buchanan, Emily, , ,  [Electronically Filed] Date 10 17 2016	Y